QE JC13	Under the Paper	ANSMITTAL FORM		s are required to respond to a collection Application Number Filing Date	and Tradamark O			
ļ	Total Number of P	Pages in This Submission	3	Attorney Docket Number	UTEP0002U	JSA J		
	Amendmen Afte Afte Afte Afte Afte Afte Afte Afte	e Attached nt/Reply er Final idavits/declaration(s) of Time Request bandonment Request n Disclosure Statement copy of Priority		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addr Terminal Disclaimer Request for Refund CD, Number of CD(s) arks	ess	After Allowance communication to Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): us Inquiry		
	Firm or Individual name Signature SIGNATURE Winston Hsu, Reg.			No.: 41,526				
	Date Story Cartificate OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on							

Signature This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

the date shown below. Typed or printed name

Under Raperweeth Eduction Act of 1995, no persons are require	ed to re	espond to	U.S. Pato a collec	tent and	Approved for use through 07/31/2006, OM	B/17 (10-03) B 0651-0032 COMMERCE atrol number.
The state of the s			**		Complete if Known	
FEE TRANSMITTAL	Application Number		umber	10/064,598		
for EV 2004		Filing Date			2002/7/29	
for FY 2004		First Named Inventor			Shi-Hui Zhang	
Effective 10/01/2003. Patent fees are subject to annual revision.	_	Examiner Name				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit				2651	
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Attorney Docket No.			UTEP0002USA	
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES Large Entity , Small Entity					
Deposit Account:	<u>Large</u> Fee	Fee		<u>-ntity</u> Fee	Fee Description	
Deposit Account 50-3105	Code		Code	(\$)	· · · · · ·	Fee Paid
Number	1051		2051		Surcharge - late filing fee or oath	
Deposit Account North America Intellectual Property Corp.	1052	50	2052	c	Surcharge - late provisional filing fee or over sheet	
Name The Director is authorized to: (check all that apply)	1053		1053		Non-English specification	
Charge fee(s) indicated below Credit any overpayments	l .	2,520	1812 2	,	or filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804		Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805 1	1,840* F	Requesting publication of SIR after Examiner action	
to the above-identified deposit account.	1251	110	2251		Extension for reply within first month	
FEE CALCULATION	1252		2252		Extension for reply within second month	
1. BASIC FILING FEE Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	2 330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	3 290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee		1 1,510	l		Petition to Institute a public use proceeding	\vdash
SUBTOTAL (1) (\$) 0.00	1452		2452		Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		3 1,330	2453		Petition to revive - unintentional	
Fee from Extra Claims below Fee Paid	150	1 1,330 2 480	2501 2502		Utility issue fee (or reissue) Design issue fee	
Total Claims -20** = X = =	150		2502		Plant issue fee	
Independent 3** = X = X	146		1460		Petitions to the Commissioner	
Multiple Dependent =	180		1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	180	6 180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	802	1 40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	180	9 770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	

1201 00	over original patent	1801 770 2801 385 Request for Continued Examination (RCE)
1205 18	2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application
**or number p	SUBTOTAL (2) (\$) 0.00 previously paid, if greater; For Reissues, see above	Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00
SUBMITTED BY	7	(Complete (if applicable))
Name (Print/Type)	Winston Hsu	Registration No. (Attorney/Agent). 41,526 Telephone 886289237350
Signature	10/1/11/18	pm 1211 Date 8/9/200

2810 385 For each additional invention to be examined (37 CFR 1.129(b))

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2201 43 Independent claims in excess of 3

2203 145 Multiple dependent claim, if not paid

1201 86

1203 290